

# CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Securities Rules and Regulations PAC

Name (print)

Office (if applicable)

District (if applicable)

505 N. Rainbow Blvd, Suite 300 Las Vegas, NV 89107 (702) 221-1952

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

ANPAC 648

Select Appropriate Box(es): ☐ CANDIDATE ☒ BAG ☐ POL PREY ☐ INDEXT ☐ AMENDED ☒ ANNUAL FILING

☒ Annual Filing - Due January 15, 2004

Period: January 1, 2003 - December 31, 2003

☐ Report #1 - Due August 31, 2004

Incumbents in an Office with a 4-year term

Period: Jan. 5, 2001 - Aug 26, 2004

Incumbents in an Office with a 6-year term

Period: Dec. 20, 1998 - Aug 26, 2004

All others

Period: Jan. 1, 2004 - Aug. 26, 2004

Ballot Advocacy Groups (BAGs) only:

Period: Dec. 5, 2002 - Aug 26, 2004

☐ Report #2 Due - October 26, 2004

Period: Aug. 27, 2004 - Oct. 21, 2004

☐ Report #3 Due - January 15, 2005\*

Period: Oct. 22, 2004 - Dec. 31, 2004

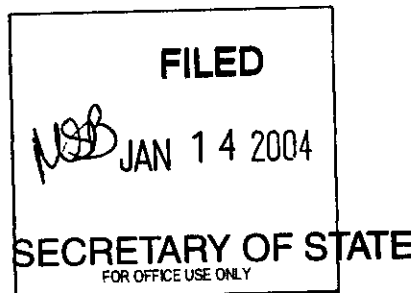
BAGs only:

Period: Oct. 22, 2004 - Dec. 5, 2004

☐ Annual Filing - Due January 15, 2005

Period: January 1, 2004 - December 31, 2004

\* Third Report suffices for 2005 Annual Filing if candidate also filed Report Nos. 1 and 2



## CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100

| This Period         | Cumulative From Beginning of Report Period Through End of This Reporting Period |
|---------------------|---|
| 1,100 <sup>00</sup> | 1,100 <sup>00</sup>   |
| 0 <sup>00</sup>     | 0 <sup>00</sup>   |

2. Total Monetary Contributions Received of \$100 or Less

| This Period     | Cumulative From Beginning of Report Period Through End of This Reporting Period |
|-----------------|---|
| 0 <sup>00</sup> | 0 <sup>00</sup>   |

3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)

|                     |                     |
|---------------------|---------------------|
| 1,100 <sup>00</sup> | 1,100 <sup>00</sup> |
|---------------------|---------------------|

4. Total Value of In Kind Contributions Received in Excess of \$100

|                 |                 |
|-----------------|-----------------|
| 0 <sup>00</sup> | 0 <sup>00</sup> |
|-----------------|-----------------|

## EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100

|                     |                     |
|---------------------|---------------------|
| 1,000 <sup>00</sup> | 1,000 <sup>00</sup> |
| 0 <sup>00</sup>     | 0 <sup>00</sup>     |

6. Total Monetary Expenses Paid of \$100 or Less

7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)

|                     |                     |
|---------------------|---------------------|
| 1,000 <sup>00</sup> | 1,000 <sup>00</sup> |
|---------------------|---------------------|

8. Total Value of In Kind Expenses in Excess of \$100

|                 |                 |
|-----------------|-----------------|
| 0 <sup>00</sup> | 0 <sup>00</sup> |
|-----------------|-----------------|

## AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

*Paul Det*

Signature

1/14/04

Date